

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST						
NAME(Last)	(First)	(Middle)	TELEPHONE			
RADCLIFFE	JOHN	Н.	808/536-7557			
MAILING ADDRESS (Street)			FAX			
222 SOUTH VINEYARD STREET, SUITE 401			808/599-4340			
(City)	(State)	(Zi	p Code)			
HONOLULU	н	HI 96813-2453				
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE						
RADCLIFFE & ASSOCIATES, LLC			808/536-7557			
MAILING ADDRESS (Street)			FAX			
222 SOUTH VINEYARD STREET, SUITE 401			808/599-4340			
(City)	(State)	(Zi	p Code)			
HONOLULU	н	968	313-2453			

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE 916-441-0973		
SPRINT COMMUNICATIONS CO				
MAILING ADDRESS (Street)	FAX 916-441-0945			
925 L STREET, SUITE 345				
(City)	(State)	(Zip Code)		
SACRAMENTO	CA	95814		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE 808-536-7557		
MELODY BUTAY DACANAY				
MAILING ADDRESS (Street)	FAX 808-599-4340			
222 SOUTH VINEYARD STREET	, SUITE 401			

(City)	(State)	(Zip Code)		
HONOLULU	HI	96813-2453		

PAR	TIII DESCRIPTION	OF SI	JBJECTS UPON WHIC	H YO	J EXPECT TO LOBBY	<u> </u>		
[]	Agriculture	[]	Education	[]	Human Services		[]	Science, Technology & Economic Development
[X]	Communications & Public Utilities	[]	Government Operations & Finance	[]	Intergovernmental Relation International Affairs	ıs,	[]	Tourism & Recreation
[]	Consumer Protection & Commerce	[]	Hawaiian Affairs	[]	Labor & Employment		[]	Transportation
[]	Culture, Arts, Historic Preservation	[]	Health	[]	Planning, Land & Water Use Management		[]	Other: (indicate below)
[]	Ecology, Energy Environmental Protection	[]	Housing	[]	Public Safety & Corrections	3		
PAR								
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete. 2								
	- / V"	<i></i>	(Signature of Loobyist)					(Date)
								(- 300-)
PAR	TV AUTHORIŽATIC	OT NC	LOBBY					
NAME				TIT	LE OF AUTHORIZING OFF	ICEF	ORP	ERSON REPRESENTED
PAUL	SIERACKI	STATE EXTERNAL AFFAIRS						
NAME	OF ORGANIZATION (if ap	plicable)			TEL	EPHO	NE 916-441-0973
SPRINT COMMUNICATIONS COMPANY, LP								
MAILI	NG ADDRESS (Street)					FAX	916-4	141-0945
925 L	STREET, SUITE 345							
	(City)		(State)		(Zip C	Code)		
SACR	AMENTO CA 95814							
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.								
	PS) <	Sila			1	31	05
(Signature of Authorizing Officer or Person Represented) (Date)								